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## BIB DATA SHEET

CONFIRMATION NO. 3014

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.		
10/551,456	09/30/2005 RULE	424	1611	053180		
<b>APPLICANTS</b> Nitin Bhalachandra Dharmadhikari, Mumbai, INDIA; Yashoraj Rupsinh Zala, Mumbai, INDIA; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/IN04/00092 04/05/2004 <b>** FOREIGN APPLICATIONS *****</b> INDIA 333/MUM/2003 04/03/2003 INDIA 1021/MUM/2003 09/29/2003 <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 06/10/2006						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /ELIZABETH S CAPAN/ Acknowledged Examiner's signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> INDIA	<b>SHEETS DRAWINGS</b> 2	<b>TOTAL CLAIMS</b> 18	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> WESTERMAN, HATTORI, DANIELS & ADRIAN, LLP 1250 CONNECTICUT AVENUE, NW SUITE 700 WASHINGTON, DC 20036 UNITED STATES						
<b>TITLE</b> Programmed drug delivery system						
<b>FILING FEE RECEIVED</b> 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			